

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	M.D.	69360	4-19-99
O.I.P.E. CLASSIFIER		12	4/27
FORMALITY REVIEW		624477	4-20-99

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final	
Original	
1	5/30/02
2	6/27/02
3	6/27/02
4	6/27/02
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50	6/27/02

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheets here

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Best Available Copy